American Community Survey Subject Definitions

The following subject definitions correspond to the variables presented in the map. For a complete listing of all subjects <u>click here</u>.

Health Insurance Coverage

In 2012, data on health insurance coverage were derived from answers to Question 16 in the American Community Survey, which was asked of all respondents. Respondents were instructed to report their current coverage and to mark "yes" or "no" for each of the eight types listed (labeled as parts 16a to 16h).

- a) Insurance through a current or former employer or union (of this person or another family member)
- b) Insurance purchased directly from an insurance company (by this person or another family member)
- c) Medicare, for people 65 and older, or people with certain disabilities
- d) Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability
- e) TRICARE or other military health care
- f) VA (including those who have ever used or enrolled for VA health care)
- g) Indian Health Service
- h) Any other type of health insurance or health coverage plan

Respondents who answered "yes" to question 16h were asked to provide their other type of coverage type in a write-in field.

Health insurance coverage in the ACS and other Census Bureau surveys define coverage to include plans and programs that provide comprehensive health coverage. Plans that provide insurance for specific conditions or situations such as cancer and long-term care policies are not considered coverage. Likewise, other types of insurance like dental, vision, life, and disability insurance are not considered health insurance coverage.

In defining types of coverage, write-in responses were reclassified into one of the first seven types of coverage or determined not to be a coverage type. Write-in responses that referenced the coverage of a family member were edited to assign coverage based on responses from other family members. As a result, only the first seven types of health coverage are included in the microdata file.

An eligibility edit was applied to give Medicaid, Medicare, and TRICARE coverage to individuals based on program eligibility rules. TRICARE or other military health care was given to active-duty military personnel and their spouses and children. Medicaid or other means-tested public coverage was given to foster children, certain individuals receiving Supplementary Security Income or Public Assistance, and the spouses and children of certain Medicaid beneficiaries. Medicare coverage was given to people 65 and older who received Social Security or Medicaid benefits.

Heath Insurance Coverage - People were considered insured if they reported at least one "yes" to Questions 16a to 16f.

No Health Insurance Coverage - People who had no reported health coverage, or those whose only health coverage was Indian Health Service, were considered uninsured.

For reporting purposes, the Census Bureau roadly classifies health insurance coverage as private health insurance or public coverage.

Private health insurance - is a plan provided through an employer or union, a plan purchased by an individual from a private company, or TRICARE or other military health care. Respondents reporting a "yes" to the types listed in parts a, b, or e were considered to have private health insurance.

Public health coverage - includes the federal programs Medicare, Medicaid, and VA Health Care (provided through the Department of Veterans Affairs); the Children's Health Insurance Program (CHIP); and individual state health plans. Respondents reporting a "yes" to the types listed in c, d, or f were considered to have public coverage.

The types of health insurance are not mutually exclusive; people may be covered by more than one at the same time. The U.S. Department of Health and Human Services, as well as other federal agencies, use data on health insurance coverage to more accurately distribute resources and better understand state and local health insurance needs.